

Clear Form

RECEIVED**MAR 11 2024**CLERK, U.S. DISTRICT COURT
NORTH DISTRICT OF CALIFORNIA**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**Taiming Zhang
MOVANT

Plaintiff,

vs.

Defendant.

CASE NO. 4:23-cv-05448, 05885**APPLICATION TO PROCEED
IN FORMA PAUPERIS**

(Non-prisoner cases only)

I, Taiming Zhang, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ☐ No ☒

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary



1 and wages per month which you received.

2 I have never in my life been employed.

3

4

5 2. Have you received, within the past twelve (12) months, any money from any of the
6 following sources:

7 a. Business, Profession or Yes ____ No ☒
8 self employment?

9 b. Income from stocks, bonds, Yes ____ No ☒
10 or royalties?

11 c. Rent payments? Yes ____ No ☒

12 d. Pensions, annuities, or Yes ____ No ☒
13 life insurance payments?

14 e. Federal or State welfare payments, Yes ____ No ☒
15 Social Security or other govern-
16 ment source?

17 If the answer is "yes" to any of the above, describe each source of money and state the amount
18 received from each.

19

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21 3. Are you married? Yes ____ No ☒

22 Spouse's Full Name: _____

23 Spouse's Place of Employment: _____

24 Spouse's Monthly Salary, Wages or Income:

25 Gross \$ _____ Net \$ _____

26 4. a. List amount you contribute to your spouse's support: \$ _____

27 b. List the persons other than your spouse who are dependent upon you for support
28 and indicate how much you contribute toward their support. (NOTE: For minor



children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.)

5. Do you own or are you buying a home? Yes ___ No ☒

Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ___ No ☒

Make _____ Year _____ Model _____

Is it financed? Yes ___ No ___ If so, Total due: \$ _____

Monthly Payment: \$ _____

7. Do you have a bank account? Yes ☒ No ___ (Do not include account numbers.)

Name(s) and address(es) of bank: Bank of China

Present balance(s): \$ 0

Do you own any cash? Yes ___ No ☒ Amount: \$ _____

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No ☒

8. What are your monthly expenses?

Rent: \$ _____ Utilities: _____

Food: \$ 500 Clothing: _____

Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Account</u>
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

no



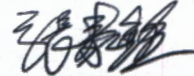
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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ____ No ☒

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

Feb 28, 2024



DATE

SIGNATURE OF APPLICANT

I am medically depressed and anxious thanks to the harms by Andrew Joseph Bonomolo and others. I live on my elderly mom's pension. I only have expenses on food.

